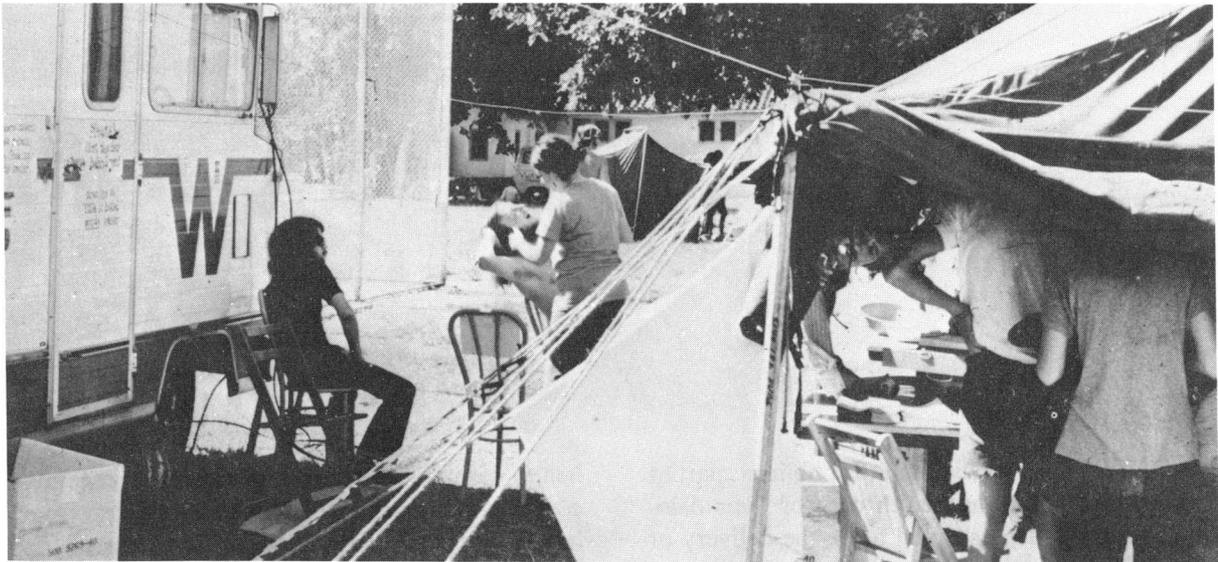

Supplying Health Care to Nondelegates During 1972 National Political Conventions



DAVID A. ROSENFELD, MD, CLIFFORD FINDEISS, MD, MILTON SASLAW, MD,
EUGENE NAGEL, MD, JEAN ALLEN, MPH, AND JAY WEINSTEIN, MHA



MIAMI BEACH was selected as the site of the 1972 nominating conventions of the Democratic and Republican parties. The County Manager of Dade County, in which Miami Beach is a municipality, was designated by the Governor to coordinate local planning for the conventions. He, in turn, designated the Comprehensive Health Planning Council of South Florida, Inc. (HPC), to plan for health service delivery during the conventions. This nonprofit, voluntary health agency was organized under P.L. 89-749, the Comprehensive Health Planning Act of 1966.

In May 1972 this council therefore appointed an ad hoc committee to coordinate emergency services planning for the two conventions, which were scheduled 5 weeks apart: the Democratic, July 10-13, and the Republican, August 21-23. Because the first convention was then only 8 weeks away, this 30-member committee was operating under stringent time constraints. The committee's goals were (a) to make adequate primary

and emergency health services readily accessible to convention visitors and (b) to assure appropriate and efficient use of existing health facilities.

An early activity of the committee was to research the experience of other communities that had planned for political conventions. There was concern that Miami and Miami Beach might undergo violence like that experienced at the 1968 Democratic Convention in Chicago. The staff also investigated the methods other communities had used to provide health services for other mass assemblies of people, especially for large numbers of protesters. In the experience of Washington, D.C., with mass protests (1-4), the factors that affected the delivery of health services to such groups included advanced planning, the number and age of the participants, the amount and type of civil disobedience, the duration and location of the assemblies, and the location of available medical facilities.

Health worker takes information from new patient at Flamingo Park medical tent



Since the Democratic and Republican parties were preparing for the health care of their delegates, the main need seemed to be the delivery of health services to nondelegates, those persons not officially connected with the conventions who were expected to come to Miami Beach to voice protests. Health care plans for the political party officials would be included in an overall community plan so that the ad hoc committee's main focus would be the nondelegates.

Complicating the creation of a suitable plan were several unknowns. How many nondelegates would assemble and where? What sources of financial and manpower assistance would be available? Would demonstrators remain in the Miami area during the 5-week convention interim?

Based on the experience of other communities, committee members made certain assumptions about the nondelegates. Many would be young and healthy, and most of their health problems would be minor (sunburn, respiratory infections, minor injuries, and drug abuse). On these assumptions, the planners determined that the major need would be for first aid and basic primary

health care. They decided, however, to formulate contingency plans for the delivery of emergency health services in the event of massive civil disobedience.

Accurate predictions could not be made about the number of nondelegates to expect, but estimates ranged from 5,000 to 250,000. The

Dr. Rosenfield, who is now a family practice physician, Family Health and Social Service Center, Worcester, Mass., and an assistant professor, Department of Community and Family Medicine, University of Massachusetts Medical School, at the time of the project was a resident in the Department of Family Medicine, University of Miami School of Medicine. Dr. Findeiss is medical director of the Emergency and Trauma Service, Hialeah Hospital, Hialeah, Fla., and medical director of the Metropolitan and Dade County (Fla.) Fire Rescue, and Dr. Saslaw is director of the Dade County Department of Public Health. Dr. Nagel, formerly a professor in the Department of Anesthesiology, University of Miami School of Medicine, is now, professor and

chairman, Department of Anesthesiology, Harbor General Hospital (University of California at Los Angeles), Torrance, Calif. Ms. Allen is associate health planner, Comprehensive Health Planning Council of South Fla., Inc., and Mr. Weinstein is the assistant director of hospital operations, Jackson Memorial Hospital, Miami.

The work described was supported in part by the Division of Emergency Health Services, Health Services and Mental Health Administration, Department of Health, Education, and Welfare, under Regional Order No. PLD-12255-72. Tear-sheet requests to David Rosenfield, MD, 47 Midland St., Worcester, Mass. 01602.

planners did not know where the nondelegate assemblies would occur or where campsites for the nondelegates would be located. They hoped, however, that Dade County and the City of Miami Beach would designate camping areas having adequate water and sanitary facilities. The planners decided to rely upon volunteer health manpower from Dade County, but sources for financial assistance were less readily identifiable. Accepting these uncertainties and assumptions, the health planners drafted a health care plan.

Plan for Health Services

The health planning council's ad hoc committee drew up a plan for the delivery of primary health care and emergency services based upon an initial outline submitted by Rosenfield, who was a member of the committee. The plan provided for primary and emergency health care, including emergency first aid and triage, and for the care of the common medical problems of ambulatory patients and the problems occasioned by drug abuse (5).

For each group of 20,000 nondelegates, there was to be one central primary care facility and three to five satellite units from which health care services would be delivered. The central facility would also be a supply, communications, and transportation center. Separate areas for the treatment of drug problems and for tear gas decontamination would be included in the central facility. Satellite units would serve as extensions of the primary care facility, providing primary care at campsites and other areas of congregation.

The staffing plans for the primary care units were based on a concept of primary care teams,

made up of physicians, nurses, and allied health personnel. Also, "street medics," consisting of medical and nursing students and paramedical personnel, would mingle with the crowds, identify medical problems, render first aid as needed, and assist the sick or injured to reach health facilities.

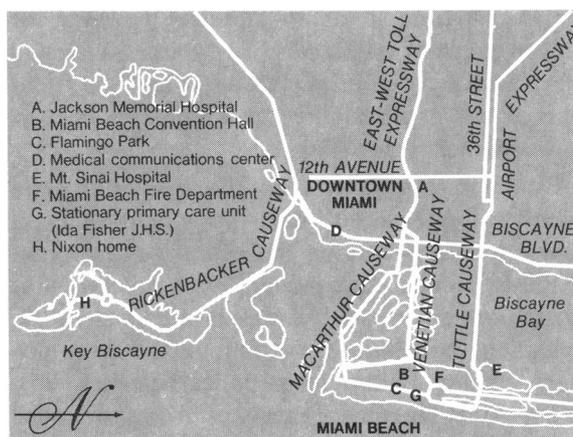
The Dade County Department of Public Health was assigned organizational and operational responsibility for implementing the plan. An operations chief was appointed and an organizational structure prepared.

Implementing the Plan

In July, preceding the Democratic Convention, certain steps were taken to implement the plan. Flamingo Park, located on Miami Beach (see map), was identified as the major campsite area for nondelegates. Subsequently, the Ida Fisher Junior High School, two blocks from this park, was selected as the central primary health care facility. The map shows the location of these two areas in relation to the convention hall.

Two mobile health care vans (a 40-foot trailer and a 20-foot camper) were loaned by other county health departments to serve as satellite health care units. The Public Health Service supplied a large tent and also cots, blankets, and other heavy medical supplies. A grant from the Emergency Medical Services Section of the Florida State Division of Health provided funds for the purchase of the rest of the medical supplies that were procured locally by the Dade County Department of Public Health. (A list of these supplies, equipment, and drugs—103 items—will be supplied by Rosenfield upon request.)

Medical care facilities for nondelegates at 1972 national Democratic and Republican Conventions, Miami and Miami Beach, Fla.



Approximately 100 lay and 300 health professional volunteers were recruited by the American Red Cross, the Dade County Medical Association, the University of Miami School of Medicine, and other health professional associations and were trained.

Members of the faculty from the University of Miami School of Medicine prepared more than 8 hours of video tapes to train health professional volunteers so that they would be cognizant of the potential health problems of the nondelegates and of methods for their treatment. The subjects of these tapes included sun-related conditions, gastroenteritis, venereal disease, cardiopulmonary resuscitation, drug abuse problems, first aid, and the initial care of injuries. The training for the street medics was coordinated by a member of the Medical Committee for Human Rights (MCHR), who had had previous experience with health services delivery during demonstrations in Washington, D.C. These trainees participated in sessions on crowd psychology, police tactics, Red Cross first aid, and drug abuse.

An administrator from Jackson Memorial Hospital, Miami, a county-owned facility, coordinated the scheduling of all the volunteer staff members. Twenty-four-hour coverage by physicians, nurses, and other members of the primary care team was planned. Street medic teams of two to four persons were scheduled to be available during possible demonstration periods.

The transportation services provided to patients were to depend on the severity of the patient's illness or trauma. The fire rescue squad of Miami Beach was to provide care and transportation in response to emergency situations, while a private ambulance service that was under Dade County contract was to provide routine ambulance transportation. In addition, shuttle buses were to operate hourly from 7 am to midnight between the central primary care facility on Miami Beach and the Jackson Memorial Hospital for the non-emergency transportation of volunteer workers and ambulatory patients.

Communications were given a high priority in planning for the health care that would be available for delivery during the actual political conventions; resources, however, were not available to support the desired communications network. Telephone communications among the three primary care units and local police agencies, hospitals, and ambulance services were provided

under a contract with the Southern Bell Telephone Company. In the absence of adequate radio communications, Miami Outreach, an affiliate of the National Young Men's Christian Association, was to provide a mobile communications network consisting of a base station and several two-way radio units located in mobile vans. The mobile vans were to follow congregations of demonstrators on the streets and provide communications for reporting street activities and related difficulties. Street medics were to call for assistance through the Miami Outreach communications system.

The Democratic Convention

During the Democratic Convention the 3,000 to 5,000 nondelegates included approximately 2,000 persons who camped in Flamingo Park. The 20-foot camper became a primary care unit in this park, while the 40-foot trailer was parked one block from Miami Beach Convention Hall. Both the central primary care unit at Ida Fisher Junior High School and the Flamingo Park unit

New patient waiting to give information at Flamingo Park medical tent



Nondelegate patient visits charted during 1972 Democratic and Republican Conventions

Complaints	Democrat-ic	Repub-lican	Total visits	
			Number	Percent
Minor injuries.....	72	215	287	37.5
Upper respiratory infections.....	57	80	137	17.9
Sunburn and heat exhaustion.....	27	21	48	6.3
Gastrointestinal.....	23	24	47	6.1
Dermatological.....	16	61	77	10.1
Neuropsychiatric.....	14	11	25	3.3
Gynecologic and genitourinary.....	10	10	20	2.6
Venereal disease.....	10	13	23	3.0
Drug-related.....	8	14	22	2.9
Ophthalmological.....	7	9	16	2.1
Lower respiratory infections.....	6	12	18	2.3
Alcohol-related.....	4	0	4	.5
Dental.....	3	7	10	1.3
Fractures.....	0	1	1	.1
Miscellaneous.....	13	18	31	4.0
Total visits.....	270	496	766	100.0

were kept open 24 hours daily; the facility near the convention hall was open primarily during convention hours.

The health care system for nondelegates became functional 2 days before the Democratic Convention and remained in operation for 1 day after the convention, a total of 7 days. Formal health care records were kept on 270 patients, who made 309 visits to the three primary care units. Their complaints are summarized in the table.

The most common reasons for visits were minor trauma and upper respiratory infections. There were few problems related to drug abuse. Only 24 patients were referred to Jackson Memorial Hospital: 15 for specialty consultations and laboratory tests, 4 for X-rays, 2 for suturing, 2 for drug overdose, and 1 for replacement of a colostomy bag. Only one patient was hospitalized, a man suspected of having hepatitis.

In addition to the patients for whom formal records were made, there were 405 minor patient encounters for which no charts were kept. These encounters consisted primarily of dispensing salt tablets and performing minor first aid.

Interconvention Period

The nondelegates voluntarily left Flamingo Park on the day after the Democratic Convention, so that it was unnecessary to provide health services in the interim before the Republican Convention. The ad hoc committee, therefore, had an opportunity to evaluate the implementation of its

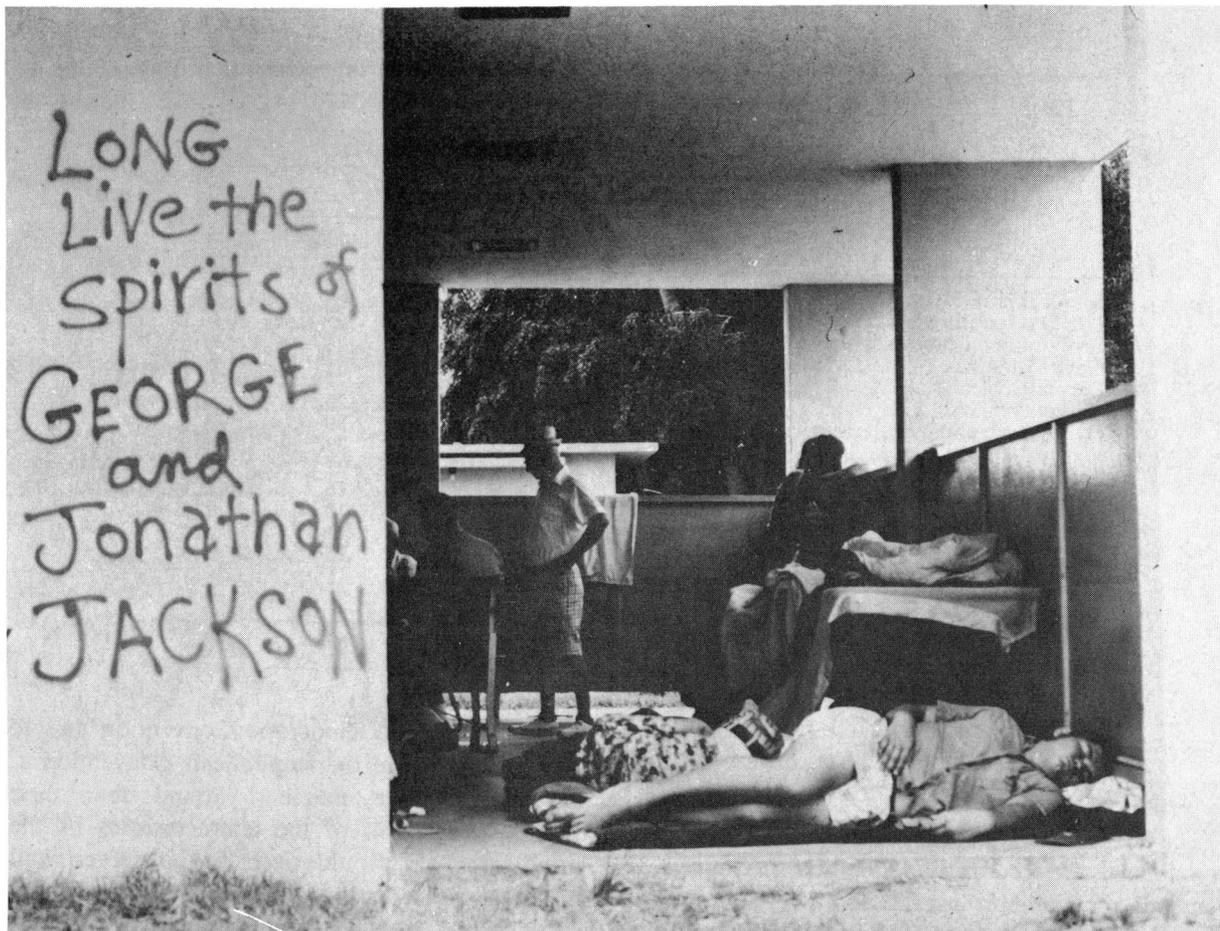
plans during the Democratic Convention and to revise them before the Republican Convention.

The committee members found that their original assessment of the characteristics of the population that would need to be served and health problems that would arise had been essentially correct except that the numbers of nondelegates were overestimated and, consequently, their health care requirements. Utilization of the junior high school site was not sufficient to warrant its use as a treatment area during the Republican Convention. Only the primary care units at Flamingo Park and the Convention Hall were maintained. In addition, a large treatment tent was erected adjacent to the Flamingo Park camper unit. The junior high school location was maintained primarily as a backup supply area.

To provide better radio communications between street medics and the Flamingo Park primary care unit, hand-carried two-way radios were added for the Republican Convention.

The Republican Convention

The Republican Convention experience differed from that of the earlier Democratic Convention in three aspects—the number of demonstrators, the type of protests, and the police reaction. During the Republican Convention approximately 5,000 nondelegates resided in Flamingo Park. Health care was provided for 7 days, including 3 days before the convention. On the final night of the convention, protest leaders planned massive non-



Revolutionary slogan does not disturb peaceful slumber of two young visitors at Flamingo Park shelter

violent civil disobedience. Their plan called for preventing convention delegates from attending the final session by staging sit-down demonstrations that would block intersections leading to Convention Hall.

When these planned demonstrations occurred, they were accompanied by some acts of vandalism. The police used tear gas for crowd control, and street medics and staffs of the primary care units treated an estimated 500 to 1,000 persons for tear gas exposure during the final evening. The treatment used for tear gas exposure and minor tear gas burns consisted primarily of profuse irrigation with water. There were no known serious injuries resulting from these incidents.

Formal records were kept on 496 patients during the Republican Convention, not including the patients treated for tear gas exposure. The problems of these patients are summarized in the table. As during the Democratic Convention, the most common complaints were minor injuries and upper respiratory infections; again, few drug-related problems were encountered.

Of the 496 patients charted, 28 were referred to Jackson Memorial Hospital: 12 for specialty consultation and laboratory tests, 10 for X-rays, 3 for dental extractions, and 3 for suturing. Two patients were admitted to the hospital: one admission was psychiatric; the other, orthopedic. The orthopedic patient was a 20-year-old woman who had suffered a trimalleolar ankle fracture when hit by a car near Convention Hall on the evening of the massive demonstrations. Also, several dogs were brought to the Flamingo Park health facility for veterinary consultation.

First-aid tents, set up in Flamingo Park by Miami Outreach and by the Vietnam Veterans Against the War, served as first-aid buffers for the primary care units. The impact of the street medics was difficult to measure, although their role in providing first-aid care, especially to tear gas victims, was clearly evident and valuable.

General Evaluation

After the Republican Convention, the ad hoc committee again met to evaluate the entire

process of providing medical care to nondelegates. Following are some of the comments of its members:

1. A major initial need was to identify the resources that would be required to assure adequate medical supplies. These resources were not identified or made available until the week just before the Democratic Convention. Planning and implementation would have been facilitated by their earlier identification.

2. The plan for providing care was successfully implemented and its goals were achieved: the primary care units provided adequate health care for the nondelegates, and local health facilities were therefore not abused.

3. The provisions for primary health care proved more than adequate. With the same facilities, it was estimated that at least twice as many persons could have been cared for adequately.

4. Although the emergency capability of the system was not seriously challenged, committee members considered the provisions made for emergency health care to be less than optimal. During the last evening of the Republican Convention, when emergency health care capabilities were needed, the need for better interagency communications and coordination became evident since the police, the ambulance service, and health care workers were unable to communicate well with each other.

5. Throughout the convention period only a small number of patients with drug-related problems came to the primary care units. A partial explanation may be that many persons with minor complaints such as "bad trips" chose to be treated by their friends or by the nonmedical volunteers of Miami Outreach. That few of these problems were serious can be largely attributed to the self-administered security force that had been organized by the nondelegates to keep pushers of hard drugs out of Flamingo Park. In addition, unidentified drugs were obtained and analyzed by Miami Outreach, and the results were advertised to the park's residents in a daily newsletter.

6. Despite crowded conditions and less than optimal food preparation facilities, there was no serious outbreak of gastroenteritis. This achievement can be explained partially by the clean water and toilet facilities provided by Dade County and its department of public health.

7. Finally, an intangible factor contributed to the success of this health care program. During

both conventions there was a spirit of cooperation and a readiness to communicate among health planners, Dade County officials, and the non-delegate groups. Cooperation and communications improved as people became more accustomed to working together.

Summary

The Comprehensive Health Planning Council of South Florida, Inc., was assigned the task of planning for health service delivery during the two conventions. Aware that Republicans and Democrats had already made plans for health care for those officially connected with the conventions, the ad hoc committee of the council formulated a plan for supplying health services to the possibly large numbers of young people who might come to the area to voice protests during the conventions. The plan stressed primary and emergency medical services. The Dade County Department of Public Health was assigned organizational responsibility for implementing the plan.

During the conventions the health care services were used by the nondelegates, but only a comparatively small number of nondelegates came to Miami Beach. The plan appeared to successfully achieve its two main goals of making primary medical care available to nondelegates and of preventing the abuse of local health facilities. The emergency capabilities of the health care system established for nondelegates were not seriously challenged, but the need for better interagency communications among police, ambulance services, and health workers was evident.

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